## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

ipj no	propriate. All further c licated unless corrected intenance fee notificati	orrespondence including the below or directed others	ng the Patent, advance or herwise in Block 1, by (a	ders and notification of n ) specifying a new corres	naintenance fees w pondence address;	ill be m and/or	nailed to the current of (b) indicating a separ	correspon ate "FEE	dence address as ADDRESS" for	
	CURRENT CORRESPONDE		Fee(	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
	32894	7590 06/13	/2008	nave				riccion		
	HOWREY LLP C/O IP DOCKET	TNG DEPARTME	NT	I her State	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
2941 FAIRVIEW PARK DR., SUITE 200 FALLS CHURCH, VA 22042				trans	transmitted to the USPTO (\$71) 273-2885, on the date ind				ed below.	
				·					(Signature)	
					· .		_ <del></del>		(Date)	
/	APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.			CONFIRMATION NO.	
۲.	10/543,125	07/22/2005	nnes Antonius Maria Rein	05589.0017.PCUS00 2621						
Γľ	TLE OF INVENTION:	EVAPORATIVE COO	LER WITH ANTIMICRO	OBIAL PROVISIONS						
									-	
			•							
	APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional		YES	\$720	\$300	\$0	\$1020		09/15/2008		
EXAMINER		NER	ART UNIT	CLASS-SUBCLASS						
	JONES, M		3744	062-304000						
	Change of correspo Address form PTO/SB/	ndence address (or Cha (122) attached. cation (or "Fee Address"	n of "Fee Address" (37 nge of Correspondence "Indication form led. Use of a Customer	or agents OR, alternative	f up to 3 registered patent attorneys ternatively, a single firm (having as a member a ley or agent) and the names of up to ent attorneys or agents. If no name is  1 DAVID P. DWEN  2 J4COBUS C. RASSE					
				THE PATENT (print or type data will appear on the pa	•	ee is ide	entified below, the do	cument h	as been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Dxycell Holding B.V. HEERENVEEN, THE NETHERLANDS										
Plε	ase check the appropria	nte assignee category or	categories (will not be pr	inted on the patent) : $\Box$	Individual 🖄 Co	orporatio	n or other private gro	up entity	Government	
	The following fec(s) at	small entity discount p	permitted)	. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _O \( \frac{0.30}{3.0.30} \) (enclose an extra copy of this form).						
	Change in Entity State	• .	•	☐ b. Applicant is no long	ger claiming SMAI	LL ENT	ITY status. See 37 CF	R 1.27(g)	0(2).	
NC nt	OTE: The Issue Fee and erest as shown by the re	Publication Fee (if requestords of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than t Office.	he applicant; a regi	stered at	torney or agent; or the	e assigned	or other party in	
	Authorized Signature _	2	lan.		Date	A49	just 2008		<u>.</u>	
	Typed or printed name		P. OWEN				43,344		<del></del>	
Th in iul hi:	is collection of informa application. Confidenti omitting the completed is form and/or suggestion x 1450, Alexandria, Vi	tion is required by 37 C ality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DC	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR (	on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO	retain a benefit by t imated to take 12 r ridual case. Any co or, U.S. Patent and D THIS ADDRESS	he publication in the public minutes of the public ments of the pu	c which is to file (and to complete, including on the amount of tim ark Office, U.S. Depa TO: Commissioner for	by the Us g gathering he you record rtment of or Patents	SPTO to process) g, preparing, and quire to complete Commerce, P.O. s, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.